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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number		102		
		First Named Inventor		Swinton	В.	Burkhalter
		COMPLETE IF KNOWN				
		Application Number				
☐ Declaration Submitted OR with Initial Filing ☐ Declaration Submitted after Init Filing (surcharge (37 CFR 1.16 (e)) required)	1 5 1 11	Filing Date				
	Submitted after Initial	Group Art Unit				
		(37 ČFR 1.16 (e))	Examiner Name			

As a below named inventor, I hereby declare that:						
My residence, mailing address, and citizenship are as stated below next to my name.						
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:						
MULTI-RISK INSURANCE SYSTEM AND METHOD						
the specification of which	(1	itle of the Invention)				
is attached hereto						
OR Was filed on (MM/DD/YYY)		as United S	States Application I	Number or PCT International		
— Was mice on (Millinger 1111)				(if applicable).		
Application Number	and was a	mended on (MM/DD/Y)	m)			
I hereby state that I have reviewed amended by any amendment spe	d and understand the co	ontents of the above ide /e.	entified specification	n, including the claims, as		
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.						
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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO		
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Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:						
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.						
Application Number(s) Filing Date (MM/DD/YY		e (MM/DD/YYYY)	numbers supplem	al provisional application are listed on a ental priority data sheet 02B attached hereto.		

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NAME OF SOLE OR FIRST IN	VENTOR :			A petiti	on has been fil	ed for this unsigned inventor
Given Name (first and middle [if any]) Swi	nton B.			Family N		khalter
1					Date /-/9-01	
Residence: City Atlanta			State	GA (Country USA	Citizenship USA
Mailing Address 8120 Grogans Ferry Road						
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City Atlanta	State (Georgia	l	ZIP	30350	Country USA
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any]) Frank M. Family Name or Surname Sexton						
Inventor's Signature Frank M Septem Date 1-19-01						
Residence: City Atlanta			State G	A	Country USA	Citizenship USA
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City Atlanta	State (Georgia		ZIP	30350	Country USA
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.						